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CONFIRMATION NO. 3029

<b>SERIAL NUMBER</b> 10/776,840	<b>FILING OR 371(c) DATE</b> 02/11/2004 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1641	<b>ATTORNEY DOCKET NO.</b> MRD 62DV (1498.2 US)
<b>APPLICANTS</b> Raghavan Rajagopalan, Beechwood, OH; Samuel I. Achilefu, St. Louis, MI; Joseph E. Bugai, St. Charles, MO; Richard B. Dorshow, St. Louis, MO;				
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/898,885 07/03/2001 ABN				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/10/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 9
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> 27805				
<b>TITLE</b> METHODS AND COMPOSITIONS FOR DUAL PHOTOTHERAPY				
<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	